I N	Agenc	y Nam		NSTON-SALEN	OLICE	. IN	INCIDENT/INVESTIGATION							OCA 2423603						
C	ORI	NC					1	REPORT								Date / Time Reported SMTWTFS Month Day Yr Time				
D E	10		NC 034		Att At Found SMTWTFS Month Day Yr Time								Day 17 Time   O7   O3   2024   O9.20 Hrs.							
N	#1	Jiiiic i	neident(s	, Abandoned V	<sup>7</sup> ehii	cle		_	Com	Month	D							r –	Time	
T	#2	Crime I	ncident	110anaonea v	CIII			_	Att	07 Locatio		03   2024 Incident	4   09	0:20  Hrs	s} 07	(	03   20		09:19 Hrs Offense Tract	
D A									Com				ed, W	inston-sa	lem N				312	
T A	#3	Crime I	ncident						Att Com	Premise	Тур	pe					Victim R		ce Type y ∏Multi Family	
	How A	Attacke	d or Con	nmitted					Forcible					Forcible	Weapon / Tools					
МО	D.	ATA C	MITTEL	)										☐ Yes ☐ No	X N/A	1/A				
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:																			
V	0			ciety  Governm ligious  L.E. Of			inancial Institution		ıknow		_	roken Bone ternal 🔲		Severe	Lacera Other					
I C	Victim/Business Name (Last, First, Middle)   Victim of DOB / Age   R														Race	Sex	Relation	ship	Resident Status	
T	V1		DA	ΓΑ OMITTED								Crime #					To Offe	nder	☐ Resident ☐ Non-Residen	
I M																	Dl		Unknown	
	Home Address DATA OMI									ГТЕО						Home Phone				
	Employer Name/Address DATA OM								ITTED							Business Phone				
	VYR	M	ake	Model	St	yle	Color		Lic	c/Lis				Vin						
				<u> </u>	<u> </u>		<u> </u>		•											
О																				
T H																				
E	E																			
R S																				
I N																				
V																				
O L																				
V E																				
D																				
Status Codes	L = L (Chec	ost S k "OJ"	= Stolen column	R = Recovered if recovered for other	D = er jur	Damaged isdiction)	Z = Seized	B =	Burn	ed C=	Cou	ınterfeit / F	Forged	F = Four	ıd					
	Victim #	DCI	Status	Value	Property Description								Mal	Make/Model Serial Number						
							E SCOOTER								NAME/	E/Burn-e-ma DATA OMITTED				
P - R - O																		TATI	FOR	
						+													FORMATION SECURITY	
																			PURPOSES	
P :																				
R																			LY THE FIRST	
T Y																	Т		/E PROPERTY ITEMS ARE	
																			SPLAYED ON	
-											_								C REPORTS	
					$\Box$	, , , , ,	1 5	,												
	Numb Office:		ehicles S	tolen 0		mber Vehi	cles Recovere Officer Sig		0 re				Ī	Supervisor	Signat	ure				
ID	SIM		COX							or Signature , C. M. (15574)										
	Comp	laınant	Signatur	e	Case Status	1						□ Loc	ated			Extra	dition Declined			
Status						☐ Closed	ctive Cleared by Arrest						rest _	Refuse to Cooperate						
							☐ Closed			hausted				nder 🗆				d	Page 1	